

# CHAPTER 11

## EARLY INTENSIVE BEHAVIORAL INTERVENTION PROVIDERS

### Provider Qualifications

Individuals who wish to provide EIBI services must meet the requirements listed below for the position in which they serve and must present documentation of their credentials and written evidence of meeting stated requirements.

#### 1. Applied Behavior Analysis Consultant

All EIBI services must have oversight by an Applied Behavior Analysis (ABA) Consultant. Providers may qualify as an ABA Consultant if they meet the following requirements:

- A master's degree in behavior analysis, education, psychology, or special education; and
- Current certification by the Behavior Analyst Certification Board as a Board Certified Behavior Analyst (BCBA); and
- At least one year of experience as an independent practitioner; and
- Successfully complete the initial approval process which includes an interview and the submission of a Work Sample that is reviewed and critiqued for competency by the DDSN interview team **or**
- A bachelor's degree in behavior analysis, education, psychology, or special education; and
- Current certification by the Behavior Analyst Certification Board as a Board Certified Associate Behavior Analyst (BCABA); and
- At least two years of experience as an independent practitioner, and
- Successfully complete the initial approval process which includes an interview and the submission of a Work Sample that is reviewed and critiqued for competency by the DDSN interview team; **or**
- A bachelor's degree in behavior analysis, education, psychology, or special education; and

- At least three years of experience as an independent practitioner; and
- Successfully complete the initial approval process which includes an interview and the submission of a Work Sample that is reviewed and critiqued for competency by the DDSN interview team.

## 2. Lead Therapist

All individuals who serve as Lead Therapist must meet the following requirements:

- A bachelor's degree in behavior analysis, education, psychology, or special education; and
- Has at least 500 hours of supervised line therapy or supervised experience in implementing behaviorally based therapy models consistent with best practices and research on effectiveness, for children with Pervasive Developmental Disorder to include autism and Asperger's disorder.

## 3. Line Therapist

All Line Therapists must:

- Be at least 18 years old and a high school graduate;
- Be able to speak, read and write English;
- Have documentation of receiving the required training as listed below prior to providing a service:
  - a. Current First Aid Certification (must be renewed at least every three years)
  - b. Current CPR Certification (must be renewed annually)
  - c. Confidentiality, Accountability, and Prevention of Abuse and Neglect
  - d. At least 12 hours of training in the implementation of applied behavior analysis to include at least 3 hours of autism and PDD specific training
- Have documentation of receiving the required annual in-service training of at least 5 hours in the implementation of applied behavior analysis, autism or PDD specific training.

- Have documentation of a clear background check conducted by the provider prior to providing a service and at least annually thereafter in the following areas:
  - a. Not listed in the DSS Child Abuse Central Registry
  - b. Have no felony convictions as determined by an officially obtained SLED report
  - c. Provide a copy of current, valid driver's license (If no driver's license submit a copy of an Official State ID Card)
  - d. PPD Tuberculin Test (see **PPD Tuberculin Skin Test Requirements, PDD Info Sheet 10**, for specifics)

## **Provider Services**

This service has four distinct components: (1) Assessment, Program Development and Training, (2) Plan Implementation, (3) Lead Therapy Intervention, and (4) Line Therapy.

### 1. Assessment, Program Development and Training: Provided by the EIBI Consultant

- Completion of adaptive assessments (Assessment of Basic Language and Learning Skills, Peabody Picture Vocabulary Test – III, and Vineland);
- Development of an EIBI plan;
- Completion of a functional behavior assessment and a behavioral support plan if challenging behaviors persist; and
- Training key personnel to implement interventions.

### 2. Plan Implementation: Provided by the EIBI Consultant

- Implementation of the EIBI plan;
- Educating family, caregivers and/or service providers concerning strategies and techniques to assist the participant in behavior reduction and skill acquisition;
- Monthly monitorship of the effectiveness of the EIBI plan;
- Modifying the EIBI plan as necessary; and

- Updating initial assessments and modifying the plan as necessary.
3. Lead Therapy Interventions: Provided by the Lead Therapist
    - Assuring the EIBI plan is implemented as written;
    - Weekly monitoring the effectiveness of the EIBI plan;
    - Reviewing all recorded data;
    - Providing guidance to and supervision of the Line Therapist;
    - Receiving family/caregiver feedback; and
    - Assuring coordination and continuity with other programs and services.
  4. Line Therapy: Provided by the Line Therapist
    - Receiving family/caregiver feedback; and
    - Assuring coordination and continuity with other programs and services
    - Implement interventions designed in the EIBI plan;
    - Records data and reports concerns and progress to the Lead Therapist.

### **Becoming a Qualified Provider**

Individuals or entities who wish to be a provider of Early Intensive Behavioral Intervention services as an Applied Behavior Analysis Consultant will receive upon request, the **Early Intensive Behavior Intervention Provider Application (PDD Form 21)** and a letter (**PDD Letter 1**) outlining the documentation that must be submitted to begin the approval process. Should an EIBI provider be located outside of a 25 mile radius from the South Carolina border, it is expected that they will comply with all procedures pertaining to the PDD Waiver/State Funded Program and, provide the same level of service as an in-state provider. All providers must successfully complete the following process.

1. Initial Approval
 

The initial approval process consists of the following:

  - Submission of Required Credentials
  - Submission of Work Sample
  - Interview Process

DDSN will designate a team to approve of individuals who apply as Applied Behavior Analysis Consultants under the PDD waiver.

- a. All required documentation must be submitted to the Autism Division Director. The Director will assure that the team leader receives all documents and information. The team leader will contact the potential provider to schedule an interview appointment.
- b. Providers who successfully complete the initial approval process will receive:
  - **A Provider Approval Letter (PDD Letter 2)** from DDSN indicating that the provider has met the criteria outlined to provide EIBI services; and
  - Paperwork to complete and return to DDSN to become enrolled as a provider under the PDD Medicaid Waiver. This includes: **EIBI Pre-Enrollment Application (PDD Form 22)**, **EIBI Provider Information Sheet (PDD Form 27)**, **Request for Taxpayer Identification Number & Certification: W-9**, **Medicaid Enrollment Data-Individual Community Long Term Care** and, **Medicaid Enrollment Data-Group Community Long Term Care**.
- c. Once the paperwork is returned, DDSN will send the paperwork and the **Request for Provider Enrollment with DHHS (PDD Letter 3)** to the Department of Health and Human Services (DHHS) to be processed. DHHS will send the provider the **EIBI Provider Enrollment Confirmation (DHHS Letter 1)** with a Medicaid provider number. All approved providers will be placed on the DDSN Qualified Provider List for EIBI services for a two-year period.

## 2. Renewal Process

- Re-Certification  
All providers of EIBI services under the PDD Waiver must submit the **Early Intensive Behavioral Intervention Provider Renewal Form (PDD Form 28)** prior to three months of the expiration of their initial approval date in order to continue to maintain provider status. All documentation must be returned by mail to the Autism Division Central Office located at 3440 Harden Street, Columbia, SC 29240.
- Continuing Education  
Twenty (20) continuing education units (CEUs) are required during the two-year period preceding a provider's renewal application. For providers who are enrolled less than two years prior to the required renewal this will be prorated by six-month increments (e.g., 1.5 years of service prior to renewal requires 15

CEUs). CEUs, which must be in the provider's area of waiver service provision, shall consist of education/training activities including professional workshop attendance, professional conference attendance, graduate level courses, or education/training opportunities offered by DDSN. CEUs are earned on a contact hour basis where 1 hour of workshop attendance or 1 hour of conference presentation attendance in an approved content area equals one CEU. All continuing education activities must be documented by a certificate from the sponsor of the activity.

- **Quality Assurance Reviews**

In order to insure that work conducted under the PDD Waiver meets the criteria established for qualification of providers, DDSN will review a sample of each providers work on an annual basis. This work sample will be assessed for quality and compliance with the criteria used in the qualification process that providers completed previously (e.g., work sample and interview). Providers are required to adhere to these criteria in all of the work they perform as a service under the Waiver.

Additionally, DDSN can become aware of a provider's work that does not meet the criteria for qualification from local DSN boards and/or families. This may consist of a complaint about unacceptable performance received by DDSN by a purchaser of the service. Should this occur, DDSN will initiate a Quality Assurance review separate from the annual review process.

If review of a provider's work sample reveals that it does not meet the established criteria, the provider will be provided a written notice by DDSN. This notice shall describe which criteria have not been met. This shall serve as a formal notice of warning and require that the provider forward a plan of correction to DDSN within 30 days. The provider's work will be sampled/reviewed again in 60 days or as soon as another service is rendered. If the second review reveals continued failure to meet the established criteria, DDSN will remove the provider from its list of approved providers and request DHHS to revoke the provider's waiver provider number.

DHHS/DDSN may, at any time review provider records to ensure adequate documentation for each unit of service rendered and billed to the waiver. The absence of documentation will result in recoupment.

## **Provider Responsibilities**

Individuals or entities that become approved providers of Early Intensive Behavioral Intervention (EIBI) services under the PDD Waiver/PDD State Funded Program are responsible for complying with the following:

## 1. Personnel

- EIBI providers will be responsible for but not limited to recruiting, selecting, retaining and terminating employees. This responsibility extends to the hiring of staff at all levels of service. As such, providers are to assure that each employee meets the requirements for the position in which they serve and be able to present documentation of their credentials and evidence of meeting stated requirements. To verify this, DDSN will randomly select and review provider employee records at least annually. Documentation of all reviews will be maintained. **The responsibility for hiring and supervising Line Therapists will not be applicable if the parent/legal guardian elects to act as the child's Responsible Party.**
- EIBI providers will be allowed to sub-contract with personal care agencies or similar entities to employ Line Therapists. This process must be approved by DDSN and all sub-contracts must be made available to DHHS upon their request. Providers must assure that Line Therapists employed through sub-contracts meet all required personnel standards.

## 2. Complaints, critical incidents, including accidents, suspected abuse, neglect or exploitation and criminal activity.

- The EIBI Consultant shall maintain a log of all complaints and critical incidents which shall include documentation of the resolution of the complaint or incident.
- The EIBI Consultant shall communicate any critical incident to the Director of the Division of Quality Management via fax (803-898-9660) within one business day.

## 3. Data Management

The EIBI Consultant will be required to submit to the child's Service Coordinator and, when specified, the Autism Division, the following information within the timeframes indicated:

- Progress reports: must be submitted to the child's Service Coordinator monthly and demonstrate/document that drills are conducted as scheduled.
- Data reports: must be submitted to the child's Service Coordinator and the Autism Division quarterly and contain cumulative graphs of target areas demonstrating progress or areas of concern.
- Assessment of Basic Language and Learning Skills (ABLLS): must be submitted to the child's Service Coordinator and the Autism Division semi-annually per the initial assessment date.

- Peabody Picture Vocabulary Test (PPVT) and Vineline: must be submitted to the child's Service Coordinator and the Autism Division annually per the initial assessment date

#### 4. Services

##### a. Service Delivery

It is required that all EIBI Providers:

- Ensure the timely delivery of the Full or Partial Assessment (i.e., within one month of the EIBI provider receiving the child's authorization for services). The Case Manager must document the date the authorization was sent to the EIBI Provider in order to establish the initial date of the monthly period. If the provider is unable to complete the necessary assessment within the required time frame, they must inform the child's Case Manager. The Case Manager will contact the parent/responsible party to determine if they want to continue waiting or select another provider. All contacts must be documented in the child's file by the Case Manager.
- Ensure the timely implementation of the delivery of Plan Implementation, EIBI Lead Therapy and EIBI Line Therapy (i.e., within one month of receiving authorization from the child's Case Manager for each service). The Case Manager must document the date the authorization was sent to the EIBI Provider in order to establish the initial date of the monthly period. If the provider is unable to complete the necessary assessment within the required time frame, they must inform the child's Case Manager. The Case Manager will contact the parent/responsible party to determine if they want to continue waiting or select another provider. All contacts must be documented in the child's file by the Case Manager.
- Ensure the EIBI Consultant makes at least monthly on-site visits to:
  1. Provide face-to-face training to the child's parents, Lead Therapist and Line Therapist pertaining to program changes or updates.
  2. Facilitate meetings with the child's EIBI team (e.g. the parents, Line Therapist and Lead Therapist) to discuss the child's progress and review monthly charts, graphs and reports.
  3. Work directly with the child to establish rapport.
- Ensure the hours of EIBI Plan Implementation are delivered face-to-face in the setting in which the child normally receives EIBI line therapy.



- Ensure the EIBI Consultant administers face-to-face, all adaptive tests per scheduled dates.
- Ensure that all therapeutic goals are implemented on a face-to-face basis with the child.

b. Center Based Services

The Pervasive Developmental Disorder Program was funded and approved based on the concept of intensive in-home intervention and all approved providers must offer home based EIBI services. However, children can receive EIBI services in a center based setting under the following conditions:

- Parent/Responsible Party who Desires Center Based EIBI Services
  1. Any parent/responsible party who desires center based services must write a statement of such to the EIBI provider indicating that the parent/responsible party has freely selected center based EIBI services for their child.
- EIBI Providers
  1. Any EIBI provider who plans to offer center based services must submit to DDSN, a letter of exception requesting the provider be allowed to operate an EIBI center. A separate letter will be required for each center and should indicate the specific location of the center and the anticipated number of children to be served. This request must be renewed annually.
  2. The provider must submit a letter attesting that they are not providing EIBI services in a location that is simultaneously providing educational services. This documentation must be submitted annually for all centers utilized by the provider.
  3. The provider must submit documentation confirming appropriate liability insurance for all centers. This documentation must be submitted annually for each center.
  4. In all settings, each child must have their own Line Therapist (i.e. the ratio must be 1:1). In addition, Coordinators and Lead Therapists may not work simultaneously with more than one child.
  5. If a child receives EIBI services in multiple locations (e.g. center based and home based) the data must clearly indicate the service location.
  6. If a child is to receive more than 50% of their services from an

EIBI center, the EIBI provider must submit a letter to DDSN requesting that more than 50% of the child's EIBI services be center based and that the child's parent/responsible party has freely selected this option.

c. Off-Site Services

There may be occasions when EIBI providers find it necessary to provide services to a child in a venue that enables the provider to construct program products. EIBI providers must abide by the following procedures pertaining to these Off-Site Services.

- Off-site services are defined as services that are specifically related to the EIBI participants program and, essential to the program's continuation and development. Examples of approved off-site services include summation of raw data, analysis of data to determine appropriate programming, program development, task analysis development related to the child's specific goal(s), development of functional behavior support plan, acquisition/development of stimuli specific to a child's program, and notebook/material management.
- Off-site services must be provided by a Lead Therapist or a Consultant who is actively working with the child from whom lead therapy or plan implementation hours are deducted. This time can not be used to pay for or compensate administrative support staff or any duties that are performed by such staff.
- A Lead Therapist may not designate from a child's approved lead therapy hours, more than two (2) hours per week for off-site services. A Coordinator may not designate from a child's approved plan implementation hours, more than two (2) hours per month for off-site services.
- When off-site services are performed the provider must submit with the monthly report to the Case Manager, a detailed summary identifying specifically what services were provided for the child. This summary must also be made available to the child's parents/legal guardians. A monthly report will be considered incomplete if off site hours are billed for but no summary is submitted.

5. Training

- Each provider must submit to the Autism Division a copy of the training curriculum used by the provider to train Line Therapist. This may occur after the provider receives their EIBI Provider Enrollment Confirmation from DHHS but the curriculum must be received by the Autism Division prior to any training taking place.

- Per the standards pertaining to Line Therapist qualifications, Line Therapist are required to have “at least 12 hours of training in the implementation of applied behavior analysis to include at least 3 hours of autism and PDD specific training” prior to providing a service (see Chapter 11 for additional specific requirements). Providers are compensated for the cost of this training in the Annual Assessment Fee of \$2,100. As such, providers should not submit a bill to the Medicaid agency or DDSN until all services (i.e. Assessment, Program Development and Training) have been rendered.
- No hours should be deducted from a child’s Plan Implementation, Lead Therapy or Line Therapy hours to cover any cost associated with the initial training of Line Therapist.